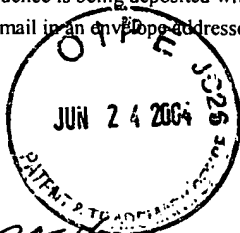


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PATENT  
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Alexandria, VA 22313-1450



On June 21, 2004

TOWNSEND and TOWNSEND and CREW LLP

By: Kira L. McMill

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:

Joseph J. Knudsen et al.

Application No.: 09/649,864

Filed: August 28, 2000

For: METHOD AND SYSTEM FOR  
VERIFYING MODEM STATUS

Customer No.: 20350

Confirmation No. 7398

Examiner: Zhong, Chad

Technology Center/Art Unit: 2154

RESPONSE

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JUN 28 2004

Technology Center 2100

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Sir:

In response to the Office Action mailed May 18, 2004, please enter the following remarks:



AF/2154 61

PTO/SB/21 (02-04)

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

Application Number	09/649,864
Filing Date	August 28, 2000
First Named Inventor	Knudsen, Joseph J.
Art Unit	2154
Examiner Name	Zhong, Chad
Attorney Docket Number	020366-073000US

Total Number of Pages in This Submission

**ENCLOSURES (Check all that apply)**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form                                | <input type="checkbox"/> Drawing(s)  | <input type="checkbox"/> After Allowance Communication to Group                            |
| <input type="checkbox"/> Fee Attached  | <input type="checkbox"/> Licensing-related Papers  | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences        |
| <input checked="" type="checkbox"/> Amendment/Reply                          | <input type="checkbox"/> Petition  | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final   | <input type="checkbox"/> Petition to Convert to a Provisional Application                | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Affidavits/declaration(s)                           | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Extension of Time Request                           | <input type="checkbox"/> Terminal Disclaimer   | <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):            |
| <input type="checkbox"/> Express Abandonment Request                         | <input type="checkbox"/> Request for Refund  | Return Postcard  |
| <input type="checkbox"/> Information Disclosure Statement                    | <input type="checkbox"/> CD, Number of CD(s)   |  |
| <input type="checkbox"/> Certified Copy of Priority Document(s)              | Remarks  |  |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application    | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. |  |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 |  |  |

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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Townsend and Townsend and Crew LLP
	Melissa A. Haapala Reg. No. 47,622
Signature	<i>Melissa A. Haapala</i>
Date	June 21, 2004

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Signature	<i>Nina L. McNeill</i>
Date	June 21, 2004